## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Peter Roskam		21 1 16 11				<u> </u>			
	(b) Address (number and street) 141 Shelley Lane		Check if addre	ss changed		Candidate's FEC Identification     H6IL06117	Number			
	(c) City, State, and ZIP Code					3. Is This New	Amended			
	Wheaton		IL	6018	7	Statement (N) OR	× (A)			
4.	Party Affiliation	5. Office Sou	ght		6. State & Dist	rict of Candidate				
	REPUBLICAN PARTY	House	1		IL	06				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)	0	:44							
	Roskam for Congress Committee									
	(b) Address (number and street) P. O. Box 713									
	(c) City, State, and ZIP Code									
	Wheaton				IL	60187				
	Di	SIGNATIO	N OF OT	MED VII.	TUODIZED	COMMITTEES				
	Di			_	g Representativ					
•					-	·				
	candidacy.	ned committee	, which is NO	I my princip	al campaign cor	nmittee, to receive and expend func	is on behalf of my			
	NOTE: This designation should be	filed with the pr	rincipal campa	nign committe	ee.					
	(a) Name of Committee (in full)									
The Four Amigos Joint Committee										
(b) Address (number and street)										
	610 S. Boulevard									
	(c) City, State, and ZIP Code									
	Tampa				FL	33606				
Localify that I have accomined this Chatage and and to the hard of more larger and the larger an										
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Signature of Candidate Date										
Peter Roskam [Electronically Filed] 08/12/2015										
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
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FEC FORM 2 (REV. 02/2009)

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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DESIGNAT	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE:This designation should be filed with t	the principal campaign committee.	
(a) Name of Committee (in full)		
Roskam Victory Committee	Э	
(b) Address (number and street) 610 S. Boulevard		
(c) City, State and ZIP Code		
Tampa	FL 33606	
DESIGNAT	FION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE:This designation should be filed with	the principal campaign committee.	
(a) Name of Committee (in full)		
Roskam Wagner Williams (	Committee	
(b) Address (number and street) 610 S. Boulevard		
(c) City, State and ZIP Code		
Tampa	FL 33606	
DESIGNAT	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE:This designation should be filed with	the principal campaign committee.	
(a) Name of Committee (in full)		
Pioneer Project		
(b) Address (number and street) 2470 Daniels Bridge Road Suite 121		
(c) City, State and ZIP Code		
Athens	GA 30606	